24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
NRCC	C C00075820
	M M / D D / Y Y Y Y
Check if 24-hour report X 48-hour report New report Amends report filed	on / January
Full Name of Payee FP1 STRATEGIES LLC	Date of Public Distribution/Dissemination
	09 23 7 2015
Mailing Address PO BOX 16504	Amount
City State Zip Code	10000.00
ALEXANDRIA VA 22302	Transaction ID : SE24-0.047292 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA Category/ Type	09 / 23 / 2015
Name of Federal Candidate Support Office	Sought: X House District: 02
BRAD ASHFORD Oppose	President Senate State: NE
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	orsement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	Amount
	Allount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate Support Office	Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	ursement For: Primary General
Tel Election of Office Cought	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	10000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	10000.00
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Keith A. Davis [Electronically Filed] Date	9 25 2015
Signature	